

DECLARATION AND POWER OF ATTORNEY USA/PCT

As a below named inventor, I hereby declare that:

- (a) My residence and Citizenship are as stated below my name. My P.O. (mailing) address is the same as my residence unless otherwise stated.
 (b) I verily believe I am/we are the original, first and sole/joint inventor(s) of the subject matter that is embraced by and for which a patent is sought on the invention entitled: **FIBERS FORMED FROM IMMISCIBLE POLYMER BLENDS**, and the specification of which: ☐ is attached hereto (_____) ☒ was filed on January 30, 2004 as (62996A).
 (check one) ☒ Application No. PCT/US04/02837 and was amended on _____

- (c) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.
 (d) I acknowledge my duty under 37 CFR 1.56 to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56(b). If this application is a continuation-in-part application, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in 37 CFR 1.56(b) that became available between the filing date of the prior application from which priority is claimed in part (f) below, and the national or PCT international filing date of this application.
 (e) I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate listed below or §365(a) of any PCT international application that designated at least one country other than the United States of America listed below, and also identify below any other foreign equivalent application for patent or inventor's certificate or any other equivalent PCT international application having a filing date before that of the application on which priority is claimed:

Number	PRIOR FOREIGN APPLICATION(S) Country or PCT	Day/Month/Year Filed	PRIORITY CLAIMED	CERTIFIED COPIES INCL.
<input type="checkbox"/>	Additional claims for benefit are attached.		<input type="checkbox"/>	<input type="checkbox"/>

- (f) I hereby Claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below, or under 35 U.S.C. §120 of any United States application(s), or under § 365(c) of any PCT international application designating the United States of America listed below:

US or PCT Appln. Serial No.	Filing Date	Status at Application Filing Date
<u>USSN 60/443,740</u>	<u>January 30, 2003</u>	<u>Abandoned</u>
<input type="checkbox"/>	Additional claims for benefit are attached.	

I hereby appoint the attorney(s) and/or agent(s) at the following Customer No. to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Address all correspondence to appointed counsel at:

00109

This appointment, including the right to delegate this appointment, shall also apply to the same extent it is applicable under the laws of the United States of America to any proceedings established by the Patent Cooperation Treaty.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor(s):

At: Freeport, Texas 77541 United States of America
 this 14 day of April, 2004

Signature: Joel Van Dun
 Full Name: Joel J. Van Dun
 Residence: 5105 Palmetto Street
Bellaire, Texas 77401 TX
 Country: United States of America
 Citizenship: Belgium
 P. O. Address: Same as Residence

At: Owings Mills MD USA
 this 5 day of April, 2004

Signature: Daniel R. Bosak
 Full Name: Daniel R. Bosak
 Residence: 240 Meyner Drive
Bellmawr, New Jersey 08031 NJ
 Country: United States of America
 Citizenship: United States of America
 P. O. Address: Same as Residence

At: _____
 this _____ day of _____, 20____

Signature: John E. Flood
 Full Name: John E. Flood
 Residence: 17311 East Summer Rose Court
Cypress, Texas 77429
 Country: United States of America
 Citizenship: United States of America
 P. O. Address: Same as Residence

At: Freeport, Texas 77541 United States of America
 this 14 day of April, 2004

Signature: Edward N. Knickerbocker
 Full Name: Edward N. Knickerbocker
 Residence: 217 Dogwood
Lake Jackson, Texas 77566 TX
 Country: United States of America
 Citizenship: United States of America
 P. O. Address: Same as Residence

☒ Additional names and signatures are attached.

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Docket Ref.: 629964
10/541564

Entitled: **DECLARATION AND POWER OF ATTORNEY**

Signature: _____
Full Name:
Residence:
City, State, Zip:
Country:
Citizenship:
P. O. Address:

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DECLARATION AND POWER OF ATTORNEY USA/PCT

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- (e) I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate listed below or §365(a) of any PCT international application that designated at least one country other than the United States of America listed below, and also identify below any other foreign equivalent application for patent or inventor's certificate or any other equivalent PCT international application having a filing date before that of the application on which priority is claimed:

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00109

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor(s):

At: Freeport, Texas 77541 United States of America
this ____ day of _____, 20__

Signature: _____

Full Name: Jozef J. I. Van Dun
Residence: 5105 Palmetto Street
Bellaire, Texas 77401
Country: United States of America
Citizenship: Belgium
P. O. Address: Same as Residence

At: _____
this ____ day of _____, 20__

Signature: _____

Full Name: Daniel R. Bosak
Residence: 240 Meyner Drive
Bellmawr, New Jersey 08031
Country: United States of America
Citizenship: United States of America
P. O. Address: Same as Residence

At: Houston, TX USA
this 12 day of April, 2004

Signature: _____

Full Name: John E. Flood
Residence: 17311 East Summer Rose Court
Cypress, Texas 77429 TX
Country: United States of America
Citizenship: United States of America
P. O. Address: Same as Residence

At: Freeport, Texas 77541 United States of America
this ____ day of _____, 20__

Signature: _____

Full Name: Edward N. Knickerbocker
Residence: 217 Dogwood
Lake Jackson, Texas 77566
Country: United States of America
Citizenship: United States of America
P. O. Address: Same as Residence

☒ Additional names and signatures are attached.

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Additional names, addresses and signatures to be attached to Form No. 1000

Entitled: **DECLARATION AND POWER OF ATTORNEY**

At: Horgen, Switzerland
this 21 day of April, 2009

Signature: _____
Full Name: Thomas Allgeuer
Residence: Felsenrainstr. 7A
City, State, Zip: Wollerau SZ 8832
Country: Switzerland C-H-X
Citizenship: Austria ✓
P. O. Address: Same as Residence

At: Horgen, Switzerland
this _____ day of _____, 20____

Signature: _____
Full Name: **Karin Katzer**
Residence: **Stockerstrasse 2**
City, State, Zip: **Horgen ZH 8810**
Country: **Switzerland**
Citizenship: **Austria**
P. O. Address: **Same as Residence**

At: Horgen, Switzerland
this _____ day of _____, 20____

Signature: _____
 Full Name: **Miguel A. Prieto Goubert**
 Residence: **Bachtelstr. 20**
 City, State, Zip: **Richterswil 8805**
 Country: **Switzerland**
 Citizenship: **Colombia**
 P. O. Address: **Same as Residence**

At: _____
this _____ day of _____, 20____

Signature: _____
Full Name: _____
Residence: _____
City, State, Zip: _____
Country: _____
Citizenship: _____
P. O. Address: _____

At: _____
this _____ day of _____, 20_____

Signature: _____
Full Name: _____
Residence: _____
City, State, Zip: _____
Country: _____
Citizenship: _____
P. O. Address: _____

At: _____
this _____ day of _____, 20_____

Signature: _____
Full Name: _____
Residence: _____
City, State, Zip: _____
Country: _____
Citizenship: _____
P. O. Address: _____

At: _____
this _____ day of _____, 20_____

Signature: _____
Full Name: _____
Residence: _____
City, State, Zip: _____
Country: _____
Citizenship: _____
P. O. Address: _____

At: _____
this _____ day of _____, 20_____

Signature: _____
Full Name: _____
Residence: _____
City, State, Zip: _____
Country: _____
Citizenship: _____
P. O. Address: _____